

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

U S IMMIGRATION REFORM PAC

ADDRESS (number and street)

2700 35th Place

☐Check if different
than previously
reported. (ACC)

Washington

DC

20007

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00253906

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 0

0 1

2 0 0 7

through

1 2

3 1

2 0 0 7

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. William W. Chip

Signature of Treasurer

Electronically Filed by Mr. William W. Chip

Date

0 1

1 6

2 0 0 7

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
U S IMMIGRATION REFORM PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2007	21910.29
(b) Cash on Hand at Beginning of Reporting Period	22278.56	
(c) Total Receipts (from Line 19)	5023.42	14762.20
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27301.98	36672.49
7. Total Disbursements (from Line 31)	2791.81	12162.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	24510.17	24510.17
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

U S IMMIGRATION REFORM PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4350.00	9900.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	655.00	4776.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5005.00	14676.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5005.00	14676.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	24.05
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	18.42	62.15
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5023.42	14762.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5023.42	14762.20

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	291.81	3662.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	291.81	3662.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	8500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2791.81	12162.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2791.81	12162.32

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	5005.00	14676.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5005.00	14676.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	291.81	3662.32
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	24.05
38. Net Operating Expenditures (subtract Line 37 from Line 36)	291.81	3638.27

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

U S IMMIGRATION REFORM PAC

A.

Full Name (Last, First, Middle Initial)

Ms. Dorothy Blair

Mailing Address 1770 Galleon Drive

City

Naples

State

FL

Zip Code

34102

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.9632

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas Blount

Mailing Address 5063 Medina Rd.

City

Woodland Hills

State

CA

Zip Code

91364

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.9633

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Dr. & Mrs. Clifford Colwell

Mailing Address 1820 Soledad Avenue

City

LaJolla

State

CA

Zip Code

92037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scripps Clinic

Occupation
Medical Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.9672

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

U S IMMIGRATION REFORM PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Edwin R. Lewis

Mailing Address 1047 Overlook Road

City

Berkley

State

CA

Zip Code

94708

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.9682

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Donald F. Theodore

Mailing Address 210 N 3rd Ave.

City

Big Rapids

State

MI

Zip Code

49307

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.9697

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Mr. Alan Weeden

Mailing Address 622 West Lyon Farm Dr.

City

Greenwich

State

CT

Zip Code

06831-4365

FEC ID number of contributing
federal political committee.

C

Name of Employer
none

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 7

Transaction ID: SA11AI.9700

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 10

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

U S IMMIGRATION REFORM PAC

A.

Full Name (Last, First, Middle Initial)

Ben Zuckerman

Mailing Address 740 Westholme Ave.

City

Los Angeles

State

CA

Zip Code

90024

FEC ID number of contributing
federal political committee.

C

Name of Employer
UCLAOccupation
Teacher

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	0	7

Transaction ID: SA11AI.9704

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

4350.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 10

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

U S IMMIGRATION REFORM PAC

A.

Full Name (Last, First, Middle Initial)

Mr. Daniel F. Marsh

Mailing Address 901 N. Stafford St., #1005

City
Arlington

State
VA

Zip Code
22203

Purpose of Disbursement
office and clerical work

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.9653

Date of Disbursement

10 / 22 / 2007

Amount of Each Disbursement this Period

196.00

SUBTOTAL of Disbursements This Page (optional)

196.00

TOTAL This Period (last page this line number only)

196.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 / 10

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

U S IMMIGRATION REFORM PAC

**A. Full Name (Last, First, Middle Initial)
FRIENDS OF SESSIONS SENATE COMMITTEE INC**

Mailing Address P O BOX 4278

City MONTGOMERY State AL Zip Code 36103

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☒ Senate
☐ President

State: AL District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.9642

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	7

Amount of Each Disbursement this Period

1000.00

**B. Full Name (Last, First, Middle Initial)
HUNTER FOR PRESIDENT INC.**

Mailing Address 9340 Fuerte Drive Suite 302

City La Mesa State CA Zip Code 91941

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☒ President

State: District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.9649

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	7

Amount of Each Disbursement this Period

1000.00

**C. Full Name (Last, First, Middle Initial)
OBERWEIS FOR CONGRESS**

Mailing Address 335 N River Road Ste 203

City Batavia State IL Zip Code 60510

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: IL District: 14

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.9651

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	0	7

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00